PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

14131-013001 Effective October 1, 2001

Ellective October 1, 2001													
			S FILED - PART (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN		
TOTAL CLAIMS								RATE	П	FEE		RATE	FEE
=OR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			65 minus 20=		• 45			X\$ 9:	- (tu5, a	OR	X\$18=	
NDEPENDENT CLAIMS			3 minus 3 =		· 0			X42=	.	Ü	OR	X84=	
١U	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		و.	OR	+280=	
If	the difference	in column 1 is	less than zero, enter "0" in or			olumn 2	1	TOTA	L	775 cm²	OR	TOTAL	
CLAIMS AS AMENDED - PART II									-			OTHER	THAN
(Column 1)				(Colu		(Column 3)	_	SMALL ENTITY		OR	SMALL		
EN! A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE
AMENDMEN	Total		Minus	**		=	П	X\$ 9=	-		OR	X\$18=	
T I	Independent	* NTATION OF M	Minus	***	- 01 4 11 4	<u> </u>	П	X42=			OR	X84=	
_	FIRST PRESE	NIATION OF M	ULTIPLE DEF	PENDEN	CLAIM		ا ا	+140=			OR	+280=	
									AL		OB	TOTAL	
ADDIT. FEEOR ADDIT (Column 1) (Column 2) (Column 3)												ADDII. FEE	
0		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER	PRESENT EXTRA	1	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMEN	Total	*	Minus	**	TON	-	П	X\$ 9=	:†	FEE	OR	X\$18=	FEE.
L I	Independent	*	Minus	***		-	11	X42=	+		OR	X84=	
_	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	T CLAIM		ן נ		+		On		
								+140=			OR	+280=	
								TOT. ADDIT. FI			OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)													
AMENUMENI C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA] [RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		-	П	X\$ 9=	-		OR	X\$18=	
T I	Independent	•	Minus	***		=	11	X42=	1		OR	X84=	1
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	_			+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											OR	ADDIT. FEE	
		nber Previously Pa					er fo	and in the	appr	opriate bo	in co	olumn 1.	